

UNITED STATES HOUSE OF REPRESENTATIVES**FINANCIAL DISCLOSURE STATEMENT**

For New Members, Candidates, and New Employees

FORM BMAY 14, 2018 Page 1 of 9
LEGISLATIVE RESOURCE CENTER
U.S. HOUSE OF REPRESENTATIVESName: MARK WAYNE LOCH Daytime Telephone:

FILER STATUS	New Member of or Candidate for U.S. House of Representatives	State: <u>FL</u>
	Candidates – Date of Election:	<u>11/6/18</u>
New Officer or Employee	Employing Office:	
	Staff Filer Type (If Applicable):	<input type="checkbox"/> Shared <input type="checkbox"/> Principal Assistant
	Period Covered: January 1, <u>2013</u> to <u>April 30, 2018</u> .	

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(Office Use Only)

A \$200 penalty shall be assessed against any individual who files more than 30 days late.

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

A. Did you, your spouse, or your dependent child: a. Own any reportable asset that was worth more than \$1,000 at the end of the reporting period? <u>or</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	E. Did you hold any reportable positions during the reporting period or in the current calendar year up through the date of filing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
b. Receive more than \$200 in unearned income from any reportable asset during the reporting period?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	F. Did you have any reportable agreement or arrangement with an outside entity during the reporting period or in the current calendar year up through the date of filing? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
C. Did you or your spouse have "earned" income (e.g., salaries, honoraria, or pension/IRA distributions) of \$200 or more during the reporting period?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	G. Did you receive compensation of more than \$5,000 from a single source in the current year and two prior years? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
D. Did you, your spouse, or your dependent child have any reportable liability (more than \$10,000) at any point during the reporting period?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

ATTACH THE CORRESPONDING SCHEDULE IF YOU ANSWER "YES"**THIS FORM INCLUDES ONLY THE SCHEDULES THAT YOU ARE REQUIRED TO COMPLETE****EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION - ANSWER BOTH OF THESE QUESTIONS****TRUSTS** – Details regarding "Qualified Blind Trusts" approved by the Committee on Ethics and certain other "excepted trusts" need not be disclosed. Have you excluded Yes No**EXEMPTION** – Have you excluded from this report any other assets, "unearned" income, or liabilities of a spouse or dependent child because they meet all three tests for exemption? Do not answer "yes" unless you have first consulted with the Committee on Ethics. Yes No

SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: MACK WAYNE LORCH

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SCHEDULE A - ASSETS & "UNEARNED INCOME"

Name: MARK WAYNE LORCH

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SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: m AER WAYNE LOECH

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Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: **MARIE WAYNE LOECH**

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SP. DC. #	ASSET NAME	EF	BLOCK A Assets and/or Income Sources	BLOCK B Value of Asset	BLOCK C Type of Income	BLOCK D Amount of Income												
						A	B	C	D	E	F	G	H	I	J	K	L	M
	401K			None														
	VANGUARD VAIIX	X		\$1-\$1,000														
	Lord Abbett LHYUX	X		\$1,001-\$15,000														
	VANGUARD 2035 VTRUX	X		\$15,001-\$50,000														
	VANGUARD 2045 VTRUX	X		\$50,001-\$100,000														
	VANGUARD 2055 VFFUX	X		\$100,001-\$250,000														
	VANGUARD VINIX	X		\$250,001-\$500,000														
	VANGUARD VS CIX	X		\$500,001-\$1,000,000														
	VANGUARD VTMUX	X		\$1,000,001-\$5,000,000														
	VANGUARD VENIX	X		Over \$5,000,000														
	MFS GLOBAL MAFEX	X		Spouse/DC Asset over \$1,000,000*														
	TRUST TR-NEX	X		NONE														
	RENTAL UNIT - CHARTO. EL	X		DIVIDENDS														
	CAMPAIGN LOAN	X		RENT														
				INTEREST														
				CAPITAL GAINS														
				EXCEPTED/BLIND TRUST														
				TAX-DEFERRED														
				Other Type of Income (Specify: e.g., Partnership Income or Farm Income)														
				None														
				\$1-\$200														
				\$201-\$1,000														
				\$1,001-\$2,500														
				\$2,501-\$5,000														
				\$5,001-\$15,000														
				\$15,001-\$50,000														
				\$50,001-\$100,000														
				\$100,001-\$1,000,000														
				\$1,000,001-\$5,000,000														
				Over \$5,000,000														
				Spouse/DC Income over \$1,000,000*														
				None														
				\$1-\$200														
				\$201-\$1,000														
				\$1,001-\$2,500														
				\$2,501-\$5,000														
				\$5,001-\$15,000														
				\$15,001-\$50,000														
				\$50,001-\$100,000														
				\$100,001-\$1,000,000														
				\$1,000,001-\$5,000,000														
				Over \$5,000,000														
				Spouse/DC Income over \$1,000,000*														

Use additional sheets if more space is required.

SCHEDULE A – ASSETS & “UNEARNED INCOME”

Name: **MARIE WAYNE LOECH** | Page **6** of **9**

SP. ACCT.	ASSET NAME	EF	Value of Asset	Type of Income	BLOCK C												BLOCK D																			
					A None	B \$1-\$1,000	C \$1,001-\$15,000	D \$15,001-\$50,000	E \$50,001-\$100,000	F \$100,001-\$250,000	G \$250,001-\$500,000	H \$500,001-\$1,000,000	I \$1,000,001-\$5,000,000	J \$5,000,001-\$25,000,000	K \$25,000,001-\$50,000,000	L Over \$50,000,000	M Spouse/DC Asset over \$1,000,000*	I None	II \$1-\$200	III \$201-\$1,000	IV \$1,001-\$2,500	V \$2,501-\$5,000	VI \$5,001-\$15,000	VII \$15,001-\$50,000	VIII \$50,001-\$100,000	IX \$100,001-\$1,000,000	X \$1,000,001-\$5,000,000	XI Over \$5,000,000	XII Spouse/DC Income over \$1,000,000*	I None	II \$1-\$200	III \$201-\$1,000	IV \$1,001-\$2,500	V \$2,501-\$5,000	VI \$5,001-\$15,000	VII \$15,001-\$50,000
SR 401K / IRA					X																															
SR Target Date 2045					X																															
SR Money Market					X																															
SR Capital Income Builder					X																															
SR TGA Checking					X																															
SR Capital One Savings					X																															
DC NH 529 - Fidelity 2030					X																															
DC2 NH 529 - Fidelity 2030					X																															
DC3 NH 529 - Fidelity 2036					X																															
DC Roth IRA - Fidelity SPY					X																															
DC Roth IRA - Fidelity SPY					X																															
DC Roth IRA - Fidelity SPY					X																															

Use additional sheets if more space is required.

SCHEDULE C – EARNED INCOME

Name: MARK WAYNE LOCH

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List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. government) totaling \$200 or more during the reporting period. For both the filer and filer's spouse, list the source and amount of any honoraria. List only the source for other spouse earned income exceeding \$1,000. See examples below.

EXCLUDED: Military pay (such as National Guard or Reserve pay), federal retirement programs and benefits received under the Social Security Act.

EXCLUSE: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

INCOME LIMITS and PROHIBITED INCOME. Be advised that the income limit and prohibited income may apply to you after you are on House payroll. The 2016 limit on outside earned income for Members and employees compensated at or above the "senior staff" rate was \$27,495. The 2017 limit is \$27,765. In addition, certain types of income (notably honoraria, director's fees, and payments for professional services involving a fiduciary relationship) are totally prohibited for Members and senior staff.

Source (include date of receipt for honoraria)	Type	Amount	
		Current Year to Filing	Preceding Year
ABC Trade Association, Baltimore, MD (July 15)	Honorarium	\$0	\$500
State of Maryland	Salary	\$20,000	\$76,000
Civil War Roundtable (Oct. 2)	Spouse Speech	\$0	\$1,000
Ontario County Board of Education	Spouse Salary	N/A	N/A
Duff & Phelps	Salary	96,666.68	265,000
Lockton	Spouse Salary	N/A	N/A

SCHEDULE D – LIABILITIES

Name: MARK WAYNE LORCH | Page 8 of 9

Report liabilities of over \$10,000 owed to any one creditor **at any time** during the reporting period. **New Members:** Members are required to report all liabilities secured by real property including mortgages on their personal residence. **Exclude:** Any mortgage on your personal residence (unless you rent it out or are a Member); loans secured by automobiles, household furniture, or appliances; liabilities of a business in which you own an interest (unless you are personally liable); and liabilities owed to you by a spouse or the child, parent, or sibling of you or your spouse. Report a **revolving charge account** (i.e., credit card) only if the balance at the close of the reporting period exceeded \$10,000. *Column K is for liabilities held solely by your spouse or dependent child.

SP DC, JT Creditor	Date Liability Incurred MO/YR	Type of Liability	Amount of Liability										
			A	B	C	D	E	F	G	H	I	J	K
Example First Bank of Wilmington, DE	5/98	Mortgage on Rental Property, Dover, DE				\$10,001-\$15,000							
ST <i>Suntrust Bank</i>	8/13	<i>Mortg. on Rent. Property - Chrg</i>	X			\$15,001-\$50,000							
						\$50,001-\$100,000							
						\$100,001-\$250,000							
						\$250,001-\$500,000							
						\$500,001-\$1,000,000							
						\$1,000,001-\$5,000,000							
						\$5,000,001-\$25,000,000							
						\$25,000,001-\$50,000,000							
						Over \$50,000,000							
						Over \$1,000,000* (Spouse/DC Liability)							

SCHEDULE E – POSITIONS

Report all positions, compensated or uncompensated, as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm, partnership, or other business enterprise, nonprofit organization, labor organization, or educational or other institution other than the United States. **Exclude:** Positions held in any religious, social, fraternal, or political entities (such as political parties and campaign organizations); and positions solely of an honorary nature. **New Members and second-year candidates** report positions held in the reporting period and the current calendar year. **First-year candidates and new employees** report positions held in the current calendar year and two previous years.

Position

Name of Organization

SCHEDULE F – AGREEMENTS

Identify the date, parties to, and general terms of any agreement or arrangement that you have with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. government; or continuing participation in an employee welfare or benefit plan maintained by a former employer.

Name: MARK WAYNE LORCH

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SCHEDULE J – COMPENSATION IN EXCESS OF \$5,000 PAID BY ONE SOURCE

Use additional sheets if more space is required.